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RUEHZS/ASEAN REGIONAL FORUM COLLECTIVE

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RHMFISS/CJCS WASHINGTON DC//J2/J3/J5//

RHEFDIA/DIA WASHINGTON DC//DHO-3//

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SIPDIS

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STATE FOR EAP/MLS, EAP/MTS, EAP/EP, INR, OES/STC, OES/IHA

STATE PASS TO AIAG ("PAT" PATTERSON, KIETH, AMB LANGE)

STATE PASS TO HHS/OGHA (STIEGER, BELL AND BHAT)

STATE PASS TO CDC (COX AND MOHEN)

STATE PASS TO USAID FOR ANE AND GH

STATE PASS TO USDA/FAS (HIGGISTON, M. ROSENBLUM, MOLSTEAD)

DEPARTMENT OF DEFENSE FOR OSD/ISA/AP (STERN)

BANGKOK FOR RMO, CDC, USAID (MACARTHUR AND BRADY)

ROME FOR FAO

E.O. 12958: N/A

TAGS: [TBIO](#) [ECIN](#) [KFLU](#) [APEC0](#) [PINR](#) [SOCI](#) [VM](#)

SUBJECT: APEC Workshop, Implementation Action Plan on Influenza

Pandemics: Progress Review and Building Capacity for Future Work;

May 7-8, Hanoi, Vietnam

HANOI 00000923 001.2 OF 004

SENSITIVE BUT UNCLASSIFIED

REF: 2006 State 77562

¶1. (U) Summary: Representatives from APEC member economies, the U.N. Systems Influenza Coordinator, the World Health Organization, the UNDP-supported Partnership for Avian and Human Influenza (Vietnam), and the Asian Development Bank met May 7 and 8 in Hanoi to discuss progress and future directions for implementing the APEC Avian Influenza Action Plan. The Action Plan, which describes 32 action items to establish long-term, sustainable efforts to prepare for, prevent and respond to avian and pandemic influenza (API), was developed and endorsed by APEC Ministers Responsible for Avian Influenza in Danang, May 2006, and endorsed by APEC Leaders in Hanoi, November 2006 (reftel and APEC Leaders' Declaration). Participants shared experiences in implementing the Action Plan, learned of U.N. activities to build capacity in the region and charted future priorities for APEC and member economies to improve API regional preparedness and response capacity. Outcomes will be considered by the APEC Health Task Force (HTF) meeting in Sydney, June 5-6, by the APEC Health Ministers in Sydney, June 7-8 and by APEC Leaders in Sydney, September 8-9.

(U) Major conclusions from the meeting included the continuing importance of strengthening the capacity of the animal health

sector, acknowledging that improving the ability to detect, monitor, report and respond to H5N1 influenza also requires focus on infectious diseases more generally; recognizing the importance of non-medical interventions, including effective and consistent communications to all segments of society; and, reaffirming the critical importance of engaging a broad spectrum of stake-holders, especially the private sector. Coordination between the public and private sector was acknowledged as the most poorly developed element of the Action Plan. It was also noted that APEC must identify areas in which it can uniquely add value, such as through its strong multisectoral connections and capacity to quickly raise the political profile of issues. Health Attaché, Embassy Hanoi, led the delegation, which consisted of representatives from HHS/CDC, USDA/APHIS, USAID, and DOS. Delegation members contributed to this report. End Summary.

(U) On May 7-8, the Government of Vietnam's Ministries of Foreign Affairs (MFA), Health (MOH) and Agriculture and Rural Development (MARD) hosted the "APEC Workshop on the Implementation of the APEC Action Plan on the Prevention and Response to Avian and (Human) Influenza Pandemics: Progress Review and Building Capacity for Future Work." The meeting was opened by Mr. Le Cong Phung, First Deputy Minister, MFA, who reminded participants that even though there has been much progress made since the endorsement of the Action Plan last May, there was still much work to be done by APEC economies, both individually and collectively, to improve regional preparedness and response capacity to the on-going threat of API. He stated that given the different economic status of economies, more investment is needed in the developing economies. Sixteen APEC member economies; Australia, Brunei Darussalam, Canada, the People's Republic of China, Hong Kong-China, Indonesia, Japan, Malaysia, Papua New Guinea, the Philippines, Russia, Chinese Taipei, Thailand, the United States, and Vietnam were represented.

Indonesia discusses challenges to implementing the Action Plan

HANOI 00000923 002.2 OF 004

(SBU) During the course of the meeting, Dr. Erna Tresnaningsih Suharsa, Director for Zoonosis Disease Control, Ministry of Health, Indonesia, highlighted the difficulties the Government of Indonesia has faced in building capacity to prepare for and respond to API. She noted difficulties in developing a sense of urgency among the population, given the more obvious impact of diseases such as malaria and tuberculosis and the perception that API is nothing to worry about. She also noted the challenge of directing governors and officials of autonomous provinces and districts to heed the recommendations and directives of the central government, and the failure of donors to follow through on commitments of assistance to Indonesia.

(SBU) Other than in the U.S. presentation, the issue of sample sharing, and Indonesia's continued lack thereof, was not directly raised. The HTF Chair, Ms. Bersabel Ephram, noted that APEC economies should continue to strive for "prompt reporting and sharing of biological specimens" and "promote greater access to medicine in times of pandemic." Dr. Suharsa asked at this point, "why must we wait for a pandemic to receive the medicine; we need it now." Ms. Ephram simply noted that this was the way it was written in the plan and it was not discussed further.

U.S. Presentation-Broadening Surveillance Capacity

(U) HHS Health Attaché, Embassy Hanoi, presented a cleared U.S. Delegation presentation on U.S. recommendations for future actions for APEC to enhance API preparedness and response. Drawing on experiences and examples from Vietnam, the main messages were that effective capacity building in surveillance, monitoring and reporting will depend on strengthening the seasonal influenza surveillance systems of APEC member economies, not just focusing efforts on H5N1. Not only will this improve H5N1 detection, but it will provide valuable baseline data on the disease burden of

seasonal influenza and provide a baseline to detect shifts in influenza-like illnesses (ILI's) that could warn of an emerging pandemic. He emphasized the need for continued improvements of monitoring and evaluation (M&E) programs, and investment in basic research, epidemiological and otherwise. He briefly discussed the CDC's "Interim Pre-pandemic Planning Guidance: Community Strategy for Pandemic Influenza Mitigation in the United States," which provides recommendations for use of non-pharmacological interventions to mitigate the effects of a pandemic their links to the case fatality based Pandemic Severity Index (PSI).

Future of APEC-value added and complementary, not duplicating

(U) Identifying the future priorities for work in APEC and the Health Task Force was the main goal of the conference. Continued efforts to engage stakeholder in a multisectoral manner, including maintaining and improving collaboration between Ministries of Health and Agriculture, was considered to be vital. Australia described their efforts to promote the concept "Functioning Economies in Times of Pandemics," which is a multisector approach to ensuring continued trade, commerce and essential services in the region in the event of a pandemic. The United States and others echoed the HTF chair's observation that engagement with the private sector was the least

HANOI 00000923 003.2 OF 004

developed of the recommended actions from the action plan and that continued and improved interactions with the APEC Business Advisory Council (ABAC) and other regional business organizations and civil society will be necessary to close this gap.

(SBU) The WHO representative warned APEC to avoid duplicating the work of other organizations and contributing to the "pandemic of meetings" that has sapped economies' of their experts and leaders when they are most needed at home.

(U) However, UNSIC representative Mr. Koji Nabae, noted that APEC can play a valuable role as a unique combination of economies sharing information, a multisectoral organization with institutionalized arrangements for cross sector coordination, and ready access to senior political decision makers. APEC provides a mechanism to both promote health security as an important element of economic development and security, as well as draw in expertise from outside the public and animal health sectors to discuss the non-medical elements of public health and animal health emergencies, such as API. The State Department representative urged the HTF, as it transitions to become a "Health Working Group" to maintain its focus on relatively short-term achievable objectives that are directly responsive to APEC Senior Officials, Foreign and Trade Ministers and Leaders.

(SBU) In side line conversations with the Health Task Force Chair, Ms. Bersabel Ephram of Canada and Vice-Chair, Dr. Li Shichuo of PRC, the issue of quality control and relevance was discussed. Canada, China and the U.S. agreed that there is a problem with how APEC funded project proposals are considered and developed. Dr. Li suggested a "board" that would evaluate projects and make recommendations to the proponents before they've been formally presented to member economies. Dr. Ragland of the U.S. agreed, and noted that the upcoming review of the Terms of Reference might be used to explore this idea. However, he also noted that this would be departure from APEC norms and would require the consent of all economies. Additionally, Canada suggested in plenary that economies collaborate more effectively in advance of proposing capacity building projects to get the greatest possible buy-in, expert input and impact. Again, the United States agreed. Finally, the United States recommended that economies, either individually or collaboratively, consider specific goals and objectives that a series of activities would aim to achieve, rather than simple "one-off" conferences that are the norm.

Conference outcomes and APEC Health Minister Meeting

(U) The Vietnamese economy will develop a draft outcomes report for consideration by the next meeting of the APEC Health Task Force, June 5-6 in Sydney. Recommendations from the workshop will be refined and endorsed and presented to APEC Health Ministers at their meeting June 7-8, also in Sydney.

(U) Australia briefed the participants on plans for the Ministerial and provided an updated draft agenda. The meeting details are also available on Australia's APEC Internet site <http://www.apec2007.org> (link to "administrative circulars" under "Delegates" under "APEC and Australia"). A draft Minister's communique will be circulated shortly for member economy comment in advance of the Sydney meeting. Recommendations from the Ministers' meeting will be considered by

HANOI 00000923 004.2 OF 004

APEC Foreign and Trade Ministers and Leaders at the Summit meeting, September 5-9, also in Sydney.

Economy Reports

(U) All economies present except the Philippines and Russia presented on their economies' progress to implement the Action Plan. Most focused on domestic programs and policies implemented over the last several years. The United States focused entirely on international efforts, referring those interested in our domestic measures to refer to www.pandemicflu.gov. Written economy reports will be presented to APEC Senior Officials at the 3rd Senior Officials Meeting in Cairns, June by the APEC Health Task Force as part of the Minister's mandated progress report on implementing the Action Plan.

(U) All presentations and documents presented at the meeting will be posted on the APEC Meeting Document Database at

http://aimp.apec.org/MDDB/pages/browseGroup.a_spx under the Health Task Force.

Contact EAP/EP, Jared Ragland at RaglandJW@State.gov; 202-647-2089 for any further information.

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